

Children's Services Outcomes Measurement System (CSOMS)  
Recommendations to Children's Cabinet October 18, 2007

**Background:**

HB53/SB177 passed during the 2007 legislative session requires the Governor's Office for Children (GOC) and some of the child-serving agencies (Department of Juvenile Services (DJS), Department of Human Resources (DHR), and the Department of Health and Mental Hygiene (DHMH)) to develop, coordinate and implement a system for outcomes evaluation for children and youth in residential child care programs (group homes) by July 1, 2008. The law mandates that the system for outcomes evaluation use standardized measures of the following eight outcomes:

1. Protection from harm while in out-of-home placement;
2. Stability of living environment;
3. Family situation and efforts to treat and counsel the family unit;
4. Educational and vocational development;
5. Job skills and employment readiness;
6. Legal and appropriate use of drugs and alcohol;
7. Progress in learning positive, nonaggressive behavioral habits; and
8. Delinquency status.

To accomplish this, a large stakeholders group consisting of representatives of the above State agencies, providers and universities met on a regular basis in August and September, 2007. (Although the Maryland State Department of Education (MSDE) was not included as a mandated participant in the bill, the group elected to include MSDE to provide input for the educational outcomes and indicators.) The group reviewed a list of over 31 indicators, as well as standardized measurement tools, including the Child and Adolescent Needs and Strengths (CANS) and the Child and Adolescent Services Intensity Instrument (CASII).

The CANS is currently used by all Wraparound pilot sites and is included in the 1915 Medicaid waiver through DHMH. The CASII is currently being used by DJS and is also included in the 1915 Medicaid waiver. The stakeholders group is recommending that the CANS be used as the standardized measurement tool for the first phase of the project that is due by July 1, 2008. This standardized measurement tool is capable of measuring six of the eight outcomes. Data reports from the child-serving agencies are recommended for measuring the other two outcomes. The stakeholders group also recommended that an already-existing State database system be used to capture the data. The recommendations from that group are below. These recommendations were approved by the Children's Cabinet Results Team (CCRT) on October 15, 2007.

### **Recommendations:**

1. The system should be built within State Children Youth and Families Information System (SCYFIS).
2. The development and implementation of the system should be done in several phases. This would enable the system to be active by the prescribed date with plans for a more comprehensive system in the future.
  - a. Phase I (to be completed 7/1/08) would begin the outcomes measurement process as follows:
    - i. Utilize the Child and Adolescent Needs and Strengths (CANS) Assessment as the standardized assessment tool to measure the following outcomes: #2: Stability of living environment; #4: Education and vocational development; #5: Job skills and employment readiness; #6: Legal and appropriate use of drugs and alcohol; and #7: Progress in learning positive, non-aggressive behavior. (See Attachment #1 for specific recommendations on CANS items for each outcome.)
    - ii. Consult with John Lyons, the developer of the CANS, on the best methodology and particular items to use to measure these outcomes. This consultation can occur through existing contracts between the State and Innovations Institute.
    - iii. Utilize reports from agencies to measure the following outcomes and indicators: #1: Protection from harm; #8: Delinquency status.
    - iv. Utilize data reports of family involvement from group homes.
  - b. In Phase II (to be completed at a future date), add the following:
    - i. Institute the use of the Child and Adolescent Services Intensity Instrument (CASII) to help determine measures of appropriate placement and improvement. (Also provider profiles and levels of intensity will assist with this).
    - ii. Review the possibility of using grades as an additional measurement of educational development (Outcome #4). Also develop a measurement of reading capacity such as percentage of youth reading at an 8<sup>th</sup> grade level.
    - iii. Review the possibility of using the number of youth injuries requiring medical attention per 100 days in out-of-home placement as an additional measurement of protection from harm (Outcome #1).
    - iv. Review the possibility of adding a case planning module to SCYFIS.
  - c. Data Development suggestions beyond Phase II:
    - i. Consider adding measures of transitioning to adulthood such as educational attainment, employment, independent housing etc.

**Other Considerations:**

1. Continued consensus and cooperation is needed among agencies for Joint Chairman's Report (JCR) and other sharing of data.
2. While it is ideal to follow youth after discharge, tracking this data after discharge from placement and termination with agency is very difficult.
3. Measuring the outcomes of group homes (or any other service system) cannot be done in a vacuum. As this process moves forward, stakeholders would like the following to be considered:
  - a. Intensity of needs of youth served and services provided.
  - b. An opportunity to capture and tell the "story behind the data."
  - c. Recognition that many partners are involved in achieving outcomes for youth in any system.

## **Attachment #1: Specific measurements for each outcome:**

The Child and Adolescent Needs and Strengths (CANS) assessment consists of seven broad categories: life domain, child strengths, acculturation, caregiver strengths, caregiver needs, child behavioral/emotional needs and child risk behaviors. Within each of these categories are individual items that are scored by the person completing the assessment. The stakeholders group reviewed the CANS in detail to determine the specific individual items from each of the general categories that were relevant to measuring the outcomes. The list below details the specific data recommended for each outcome. The items listed below from the CANS will be reviewed with John Lyons, developer of the CANS, to ensure that these are appropriate measures. Each item from the CANS lists the name of the item, the general category to which the item refers, and the page number of the CANS Comprehensive Multisystem Assessment Manual where the item can be found.

### **Outcome #1 – Protection from harm**

GOC will obtain the data for this indicator from agency reports (specifically DHR):

- The rates of unsubstantiated and indicated child abuse or neglect of children in out-of-home placements in community-based residential placements

### **Outcome #2 – Stability of living environment**

- % of children in care with 3 or more placements across agencies within 1 year (agency report)
- CANS living situation (life domain) p.4

### **Outcome #3 - Family situation and efforts to treat and counsel family unit**

Assumption: Group homes are working on family functioning by providing access and coordinating those services. Group homes would collect the following data:

- % of families who signed off on treatment plan
- % of youth with at least one connection to a family member as evidenced by a phone number or e-mail address

### **Outcome #4 - Education and vocational development**

- CANS school behavior (life domain) p.6
- CANS school achievement (life domain) p.6
- CANS school attendance (life domain) p.6
- CANS educational (child strengths) p.7
- CANS vocational (child strengths) p.7
- CANS talents/interests (child strengths) p.7

### **Outcome #5 – Job skills and employment readiness**

- CANS vocational (life domain) p.5

### **Outcome #6 – Legal and appropriate use of drugs and alcohol**

- CANS substance use (child behavioral/emotional needs) p. 12

**Outcome #7 – Progress in learning positive, non-aggressive behavior**

- CANS interpersonal (child strengths) p.6
- CANS optimism (child strengths) p.7
- CANS psychosis (child behavioral and emotional needs) p.11
- CANS impulsivity/hyperactivity (child behavioral and emotional needs) p.11
- Depression (child behavioral and emotional needs) p.11
- Anxiety (child behavioral and emotional needs) p.11
- Oppositional (child behavioral and emotional needs) p.11
- Conduct (child behavioral and emotional needs) p.12
- Adjustment to trauma (child behavioral and emotional needs) p.12
- Anger control (child behavioral and emotional needs) p.12
- Suicide risk (child risk behaviors) p.12
- Self-mutilation (child risk behaviors) p.12
- Other self harm (child risk behaviors) p.13
- Danger to others (child risk behaviors) p.13
- Sexual aggression (child risk behaviors) p.13
- Runaway (child risk behaviors) p.13
- Delinquency (child risk behaviors) p.13
- Judgment (child risk behaviors) p.14
- Fire setting (child risk behaviors) p.14
- Social behavior (child risk behaviors) p.14

**Outcome #8 – Delinquency status**

GOC will obtain the data for this indicator from agency reports (specifically DJS):

- % of children in group homes who are adjudicated for the first time to DJS
- % of children returned home to the community who are a) adjudicated, or b) re-adjudicated to DJS within 12 months.